

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2009</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) ATOCM-0349																														
Application Number: 10/804,191		Filed: March 19, 2004																														
For: Multilayer Structure Based on Polyamides and Graft Copolymers Having Polyamide Blocks																																
Art Unit: 1782		Examiner: Walter Aughenbaugh																														
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;"></th> <th style="text-align: center;"><u>Fee</u></th> <th style="text-align: center;"><u>Small Entity Fee</u></th> <th style="text-align: center;"></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$130</td> <td style="text-align: center;">\$65</td> <td style="text-align: center;">_____</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$490</td> <td style="text-align: center;">\$245</td> <td style="text-align: center;">_____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1110</td> <td style="text-align: center;">\$555</td> <td style="text-align: center;"><u>\$20.00</u></td> </tr> <tr> <td colspan="4" style="padding-left: 20px;">(\$490.00 previously paid on March 19, 2010.)</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1730</td> <td style="text-align: center;">\$865</td> <td style="text-align: center;">_____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2350</td> <td style="text-align: center;">\$1175</td> <td style="text-align: center;">_____</td> </tr> </tbody> </table> <p style="margin-top: 10px;"> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.  <input type="checkbox"/> A check in the amount of the fee is enclosed.  <input checked="" type="checkbox"/> Payment by credit card via EFS.  <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.  <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>13-3402</u>.         </p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p style="margin-top: 20px;">I am the <input type="checkbox"/> applicant/inventor.  <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71          Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  <input checked="" type="checkbox"/> attorney or agent. Registration Number 32,542.  <input type="checkbox"/> attorney or agent under 37 CFR 1.34.          Registration number if acting under 37 CFR 1.34: _____.</p> <table style="width: 100%; margin-top: 20px;"> <tr> <td style="width: 50%; text-align: center; vertical-align: bottom;"> <u>/Brion P.Heaney/</u>            Signature            Brion P. Heaney            Typed or printed name         </td> <td style="width: 50%; text-align: center; vertical-align: bottom;">           April 13, 2010            Date            (703) 243-6333            Telephone Number         </td> </tr> </table> <p style="font-size: small; margin-top: 10px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.</p>				<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	_____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	_____	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	<u>\$20.00</u>	(\$490.00 previously paid on March 19, 2010.)				<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	_____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	_____	<u>/Brion P.Heaney/</u> Signature Brion P. Heaney Typed or printed name	April 13, 2010 Date (703) 243-6333 Telephone Number
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